



PATENT

RECEIVED

MAY 15 2003  
TECHNOLOGY CENTER 2800

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/088,723  
Applicant : Benoit Couet et al.  
Filed : 22 July 2002  
Int'l Filing Date : 26 October 2000  
Title : DEPOSITION MONITORING SYSTEM  
  
TC/A.U. : 2856  
Examiner : Bellamy, Tamiko D.  
  
Docket N° : 57.0410

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Hon. Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

Lorraine Ronnlund  
Lorraine Ronnlund

May 9, 2003  
Date

## FEE FOR CLAIMS

HONORABLE COMMISSIONER FOR PATENTS  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

| (Col. 1)   |    | (Col. 2)                                   |    | (Col. 3)         | Other Than A<br>Small Entity |               |
|--|----|--|----|------------------|------------------------------|---------------|
| Claims<br>Remaining<br>After<br>Amendment        |    | Highest<br>Number<br>Previously<br>Pd. For |    | Present<br>Extra | Rate                         | Addit.<br>Fee |
| Total  | 37 | Minus                                      | 26 | 11               | (over 20)<br>x \$18.00=      | \$ 198.00     |
| Indep.   | 3  | Minus                                      | 3  | 0                | (over 3)<br>x \$84.00=       | \$            |
| [ ] First Presentation of Multiple Depend. Claim |    |  |    |                  | + 280.00                     | \$ 198.00     |
| TOTAL ADDIT. FEE                                 |    |  |    |                  |                              | \$ 198.00     |

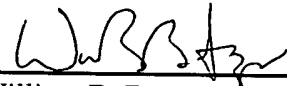
[ ] No additional fee for claims is required.

[ X ] Total additional fee for claims required \$ 198.00.

Applicant(s) authorize(s) the Commissioner to charge **Deposit Account N°. 19-0615 \$198.00** to cover the fees that may be required under 37 C.F.R. §1.16. Should this amount be incorrect, Applicant(s) authorize(s) the Commissioner to charge or credit any deficiency/overpayment to Deposit Account N°. 19-0615.

Two copies of this transmittal letter are enclosed for PTO accounting use.

Respectfully submitted,

By:   
\_\_\_\_\_  
William B. Batzer  
Registration N° 37,088

Schlumberger-Doll Research  
36 Old Quarry Road  
Ridgefield, Connecticut 06877-4108  
(203) 431-5505

Date: May 9, 2003